



**KENTUCKY BOARD OF PHYSICAL THERAPY**  
**312 Whittington Parkway, Suite 102**  
**Louisville, KY 40222**

**Steven L. Beshear**  
**Governor**

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**Scott D. Majors**  
**Executive Director**

***PHYSICAL THERAPIST***  
***PHYSICAL THERAPIST ASSISTANT***  
**EXAMINATION CANDIDATE INSTRUCTIONS**

To qualify as an examination candidate for credentialing in Kentucky, a USA educated applicant must:

- ☐ Successfully complete a CAPTE accredited Program in Physical Therapy and request the Program Director's certification of completion
- ☐ Submit a completed **Kentucky** application form with \$200 non-refundable money order, cashier's check or certified check
- ☐ Complete Kentucky's Jurisprudence Exam (JE), <http://pt.ky.gov>
- ☐ Complete a 2 hour HIV/AIDS approved course
- ☐ Submit Supervisory Agreement for Temporary Permit if applicable
- ☐ Request verification(s) for any license, certificate, or registration to be sent to our agency
- ☐ Register online for the examination at <https://pt.fsbpt.net>
- ☐ Download Authorization to Test (ATT) letter from FSBPT website and check status

***SPECIFIC INSTRUCTIONS***

**1. APPLICATION FOR KENTUCKY CREDENTIALING** Complete and return the licensure application with a billfold-sized or passport picture attached. Picture is to be head and shoulders only, at least 1" x 2", and no greater than 2" x 3". All questions and blank spaces on the application must be completed before you sign the Affidavit. Mail the application with \$200 fee payable to KY Board of Physical Therapy (money order, certified or cashier's check only).

**2. EDUCATIONAL PROGRAM DIRECTOR LETTER** Once you have completed all academic AND clinical portions of your CAPTE accredited physical therapist or physical therapist assistant program, ask the Program Director of your school to write this board a letter certifying your completion. The letter, which must be written and signed on **official school letterhead with seal and mailed directly to KY Board of PT, shall include the following information:** (1) Full name of applicant; (2) Date and degree obtained; and (3) A statement that applicant has completed all academic and clinical requirements of a CAPTE accredited program. This letter MUST be received before you will be approved for the NPTE or issued a temporary permit.

**3. TWO HOUR HIV/AIDS EDUCATION REQUIREMENTS** Complete an approved HIV/AIDS courses of at least 2 contact hours and submit a copy of the certificate to our agency. HIV/AIDS courses must be approved by the KY Cabinet for Health & Family Services. A link to the approved courses is on the home page of our website. Submit a copy of the HIV/AIDS certificate to our agency.

**4. JURISPRUDENCE EXAMINATION** Applicants must complete Kentucky's Jurisprudence Examination (JE), which is an open book exam on our Practice Act. You may take this exam online at <http://pt.ky.gov>. Your application and fee for licensure must be received in Board office before you may access the exam.

**5. VERIFICATIONS** If you have been or are currently licensed, certified or registered to practice in **any profession**, contact the licensing authority and request verification of that credential to be mailed directly to the KY Board of Physical Therapy from the licensing entity.

**6. REGISTER for the National Physical Therapy Examination at** <https://pt.fsbpt.net>. Examination dates and registration deadlines may be found on this website. After you have received your Authorization to Test letter, schedule your test date at Prometric, [www.prometric.com/fsbpt](http://www.prometric.com/fsbpt).

**7. TEMPORARY PERMIT TO WORK** If you are a first time exam candidate and wish to be employed as a Physical Therapist or Physical Therapist Assistant in Kentucky before being issued a full credential to practice, you must submit a completed "Supervisory Agreement Form" to the board and be issued a temporary permit to practice. This is a one time permit, valid for six months from date of issuance, **OR** until you have been notified of the results of the NPTE by the board. You shall not begin work/be employed as a Physical Therapist or Physical Therapist Assistant in any manner until authorized to do so by the board. Failure to comply with KRS 327.020 and/or any board regulation could result in refusal of your application or other penalty.

**8. ADA REQUEST** A request for a reasonable accommodation in testing due to a documented disability shall be submitted on an "Applicant Special Accommodations Request Form" and submitted with your application. This form may be downloaded at <http://pt.ky.gov>.

**9. BACKGROUND CHECK** NOTE: Criminal background check(s) are conducted on each applicant by the board office. This report is to confirm your response to the questions concerning convictions on your application form. It is critical you include the required court records for ALL convictions; not merely felony convictions. All convictions must be listed, not just in the last five years. Do not list minor traffic violations unless substance abuse is involved.

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The Board of Physical Therapy does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment or in the provision of services and will provide reasonable modification in the administration of all licensure exams for qualified individuals with disabilities. The qualified individual with a disability shall submit, to the board, documentation from an appropriate professional verifying the limitations imposed by his/her disability at the time of initial application. The individual with a disability shall request the effective modification.